Weathertzation Assistance Program

Work Order (Bid Form)

WORK ORDER INFORMATION

Work Order Name: WO/50005DE0023/1
Work Order Type: Weatherization
Audit Name: Audit DE0023

CLIENT INFORMATION

Client Name: Address:

Client ID: 50005DE0023 , 38015

Alt. Client ID:

AGENCY INFORMATION

Agency: 50005DE **Agency Phone:** (901) 476-5226

Address: P. O. BOX 634, 915 HWY 51 SOUTH **Fax:** (901) 476-5258

Agency Contact: Treadwell, Dwight Work Phone: (901) 274-8336

Cell Phone: (865) 335-4834

Email Address:

Company Name & License Number:	
Contractor's Signature:	

<u>COMMENT</u>

Report Run On: 5/26/2010

Measures

ı	Measure 1 li	nstall crawl space door			Componen	its		1	Inspected
C	comment Insta	III crawl space door on fron	t of house t	o inclu	de latch				
	Estimated						Actual		
#	Material / Labor	Description / Comment	Units	Qty	Unit Cost	Total	Qty	Unit Cost	Total
10	Unspecified	Misc Material	Each	1					
c	Other Detail								
				Measur	e Sub Total:] ;	Sub Total:	
	Field Notes:								
C	1. Ai 2. Ai 3. Ai 4. Re	INFILTRATION MEASURE r Seal Plumbing penetratio r Seal around baseboards r Seal around cvieling mole eplace frameing around ba rap and retape (5) boots -	ns - kitchen dings in eac ck door	h room	1	l tape			
	6. Re	etape 25 ft of supply trunk l	line						
	/ . In	stall attic access to include	e panel and trim Estimated Actual						
#	Material / Labor	Description / Comment	Units	Qty	Unit Cost	Total	Qty	Unit Cost	Total
10	Miscellaneous	Infiltration Reduction	Each	1					
	Supplies								
	Other Detail								
L]		
]		
				Measur	e Sub Total:			Sub Total:	
	Field Notes:								

Measure 3 Use	er-Spec Ceiling R			Componen	<i>ts</i> 625 so	q.ft		Inspected
Comment Install 6	625 sq. ft. R-30 attic insula	tion (blov	vn cellu	ılose)				
			Estimated			Actual		
# Material / Labor	Description / Comment	Units	Qty	Unit Cost	Total	Qty	Unit Cost	Total
1 Insulation	Attic Insulation - Cellulose, Blown - R-30	SqFt	625					
Other Detail								
			Measur	e Sub Total:			Sub Total:	
Measure 4 DW Comment	H Pipe Insulation			Componen				Inspected
# ###	Description / Comment	Heite		Estimated			Actual	Total
# Material / Labor1 Insulation	Description / Comment DHW Pipe Insulation	<i>Units</i> Each	Qty 1	Unit Cost	Total	Qty	Unit Cost	Total
	·							
2 Labor	DHW Pipe Insulation	Each	1					
Other Detail] [
			Measur	e Sub Total:			Sub Total:	
Field Notes:								

Measure 5 Flo	or Ins. R-19			Componen	ts crawl			Inspected	
Comment Install 6	625 ft R-19 Fiberglass Fac	ced Batt ir	sulatio	n					
<u> </u>				Estimated			Actual		
# Material / Labor	Description / Comment	Units	Qty	Unit Cost	Total	Qty	Unit Cost	Total	
1 Insulation	Floor Insulation - Fiberglass Faced Batt - R-19	SqFt	625						
Other Detail						_			
			Measure	e Sub Total:			Sub Total:		
Measure 6 Wal	Il Insulation			Componen	uth	Front,N	. , ,	Inspected	
Comment				Estimated	uth		Actual		
Comment # Material / Labor	Description / Comment	Units	Qty	•	uth	Front,N	. , ,	Inspected	
Comment		<i>Units</i> SqFt		Estimated	uth		Actual		
Comment # Material / Labor	Description / Comment Wall Insulation - Cellulose, Blown - 2x4		Qty	Estimated	uth		Actual		
Comment # Material / Labor 1 Insulation	Description / Comment Wall Insulation - Cellulose, Blown - 2x4		Qty	Estimated	uth		Actual		
Comment # Material / Labor 1 Insulation	Description / Comment Wall Insulation - Cellulose, Blown - 2x4		Qty	Estimated	uth		Actual		
Comment # Material / Labor 1 Insulation	Description / Comment Wall Insulation - Cellulose, Blown - 2x4		Qty 919.3	Estimated	uth	Qty	Actual		

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Measure 7 CO	Monitor is Needed			Componer	its		ı	Inspected
Comment								
			Estimated		<u> </u>	Actual		
# Material / Labor	Description / Comment	Units	Qty	Unit Cost	Total	Qty	Unit Cost	Total
1 Health and Safety Items	CO monitor	Each	1					
2 Labor	Labor	Hour	1					
Other Detail								
]		
			Measur	e Sub Total:]	Sub Total:	
Field Notes:								
	or Barrier Needed ement/Crawlspace)			Componer	nts		1	Inspected
Comment								
				Estimated			Actual	
# Material / Labor	Description / Comment	Units	Qty	Unit Cost	Total	Qty	Unit Cost	Total
Health and Safety Items	Basement / crawlspace vapor barrier	Each	1					
2 Labor	Labor	Hour	1					
Other Detail				1				
			Measur	e Sub Total:] ;	Sub Total:	
Field Notes:								
		Work O	rder Gra	and Total:		Gran	d Total:	

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